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10722363

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/722,363	11/25/2003	Steven Shepley	D-1220	4710

TITLE OF INVENTION: CASH DISPENSING AUTOMATED BANKING MACHINE DIAGNOSTIC SYSTEM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	06/24/2008
EXAM	IINER	ART UNIT	CLASS-SUBCLASS]		
HESS, D.	ANIEL A	2876	235-379000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the p	atent front page, list 3 registered patent attorn	Ralph E	I. Jocke
			or agents OR, alternative	vely, e firm (having as a memb	Christop	her L. Parmele
			registered attorney or a	agent) and the names of up rneys or agents. If no nam	pto rr 11	& Jocke LPA

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

231 SOUTH BROADWAY **MEDINA, OH 44256** 06/24/2008 SSESHE2 00000117 090428

02 FC:8001

1440.00 DA

30.00 DA

Diebold Self-Service Systems

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

North Canton, Ohio

Registration No.

division of Diebold, Incorporated

	The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit
Advance Order - # of Copies 10 The Director is hereby authorized to charge the required fee(s), any deficiency, or overpayment, to Deposit Account Number 09 - 0428 (enclose an extra copy	Advance Order - # of Copies 10	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit overpayment, to Deposit Account Number 09-0428 (enclose an extra copy of this

5. Change in Entity Status (from status indicated above)

 □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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June 20, 2008

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.

> In Re Application of: `Re:

Shepley, et al.

Application Serial No.:

10/722,363

Filed:

November 25, 2003

Confirmation No.:

4710

Notice of Allowance Date: March 24, 2008

Cash Dispensing Automated Banking Machine

Diagnostic System and Method:

Docket No.:

D-1220

Please find enclosed herewith an Issue Fee Transmittal form for filing in the abovereferenced, Application.

Very truly yours,

Ralph E. Jocke Reg. No. 31,029

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